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Bib Data Sheet

CONFIRMATION NO. 8119

<b>SERIAL NUMBER</b> 09/829,273	<b>FILING DATE</b> 04/09/2001 <b>RULE</b>	<b>CLASS</b> 704	<b>GROUP ART UNIT</b> 2644	<b>ATTORNEY DOCKET NO.</b> CRNC.78765
<b>APPLICANTS</b> Wayne R. Myers, Smithville, MO; Angela K. Rouse, Kansas City, MO; Tommy L. Hinton, Leawood, KS;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/266,411 02/02/2001				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/04/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> MO	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 60
Attorney's Signature: <i>[Signature]</i> Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> Daniel P. Devers SHOOK, HARDY & BACON L.L.P. 1200 Main Street Kansas City ,MO 64105-2118				
<b>TITLE</b> Computer system for translating medical test results into plain language				
<b>FILING FEE RECEIVED</b> 1430	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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